

**Obstetrical and Gynecological Care in Iowa:
A Report on Health Care Access
To 2013 Iowa Legislature -- Year 2012**

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Introduction

This report has been prepared annually in response to a 1997 legislative mandate detailed in the *Iowa Acts 1997 General Assembly*, Chapter 197, Section 1, Subsection 18A. The legislative reference for this report is outlined below.

NEW SUBSECTION. 18A. Consult with the Office of Statewide Clinical Education Programs at the University of Iowa, Carver College of Medicine and annually submit a report to the general assembly by January 15 verifying the number of physicians in active practice in Iowa by county who are engaged in providing obstetrical care. To the extent data are readily available, the report shall include information concerning the number of deliveries per year by specialty and county, the age of physicians performing deliveries, and the number of current year graduates of the University of Iowa College of Medicine and the University of Osteopathic Medicine and Health Sciences entering into residency programs in obstetrics, gynecology, and family practice. The report may include additional data relating to access to obstetrical services that may be available.

2012 Report to the 2013 Legislation:

The Bureau of Oral and Health Delivery Systems, Iowa Department of Public Health, has consulted with the Office of Statewide Clinical Education Programs at the University of Iowa, Carver College of Medicine and has determined that without additional funding and staff to develop and implement a survey that will collect this data, we cannot verify the number of physicians in active practice in Iowa by county who are engaged in providing obstetrical care, nor assess the availability of obstetrical services to the citizens of Iowa by using available data to show the distribution of obstetricians, family medicine providers and other health care professionals who are able to deliver prenatal and obstetrical services. Since the inception of this report, the Iowa Department of Public Health has endeavored to provide accurate and pertinent data, but has encountered several obstacles.

The data currently tracked may provide an overview of issues, but are not sufficient to directly answer the questions posed in the legislation, nor can it comprehensively portray the obstetrical and/or gynecological (OB/GYN) access issues facing the citizens of Iowa - particularly those in rural areas. Some examples of current data limitations include the following factors:

- Unavailable county-specific data on health-care professionals currently practicing obstetrics,
- Limited data on providers age,
- Unavailable or insufficient graduation rate and residency location data, and
- Unavailable specific provider specialty data

Despite the shortcomings in available data, the report does attempt to use existing data to cover some of the prenatal and obstetrical care access issues facing Iowans. This report includes the following information:

- Birth data according to occurrence,
- Location and type of health-care professional delivering the baby,

- Brief description of state demographics,
- General data on health care professionals and institutions, and
- Limited prenatal-care data.

Data sources used for this report include the following:

- U of I, Carver College of Medicine, Office of Statewide Clinical Education Programs (OSCEP),
- Iowa Department of Public Health – Bureau of Vital Records and Health Statistics,
- Iowa Board of Nursing (IBON),
- Association of Iowa Hospital and Health Systems, and
- US Census Bureau Decennial Census Data

Reports previously submitted break data into urban (Metropolitan Statistical Area) and rural (non-Metropolitan Statistical Area) categories defined by the United States Office of Management and Budget (OMB). Metropolitan Statistical Areas (MSA) are core urban areas containing a population nucleus greater than 50,000. Under this definition Iowa had 10 MSA urban areas.

The OMB, Bulletin 03-04, June 2003 revised the definition for Metropolitan Statistical Areas (MeSA). The definition was originally published December 27, 2000 by the OMB in the Federal Register (65 FR 82228 – 82238). MeSAs comprise the central county containing the core population of at least 50,000, plus adjacent outlying counties having a high degree of social and economic integration, as measured through commuting. Under this redefined definition Iowa has 20 MeSAs.

Since the inception of this report, data was collected and reported using the 10 MSA population groups. When the OMB change of definition occurred in 2003 the data would not complete a 10 year cycle for the possibility of reporting trend information. Since 2003 the data was compiled and reported using the 10 MSA and the 20 MeSA population groups, respectively. At the completion of the 2007 report, presented to the 2008 legislation, the collection and reporting changed to using the 20 MeSA population groups only.

Demographics

Rural – 79 Counties

- Rural area citizens equal approximately
- Ratio of population to PC providers
- Women of childbearing age, 15-44
- Ratio of women of childbearing age to PC providers

43.5%	1,324,641
	1859:1
16.5%	217,961
	306:1

Note: It is unknown how many providers actually see women for prenatal care or deliver babies.

- Ratio of women of childbearing age to OB/GYN providers

4541:1

Urban – 20 MeSA

• Urban area citizens equal approximately	56.5%	1,721,714
• Ratio of population to PC providers		1700:1
• Women of childbearing age, 15-44	20.9%	360,299
• Ratio of women of childbearing age to PC providers		356:1

Note: It is unknown how many providers actually see women for prenatal care or deliver babies.

• Ratio of women of childbearing age to OB/GYN providers		2325:1
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Total Rural & Urban

• According to the US Census Decennial Census data, Iowa’s current population is		3,046,355
• Ratio of Total population to the total number of PC providers		1766:1
• PC Providers working full time		1,693
• PC Providers working part time		64
• Providers full-time equivalent (FTE) estimate		1,725.0
• Women of childbearing age, 15-44		278,260
○ Women of childbearing age in rural areas	16.5%	217,961
○ Women of childbearing age in urban areas	20.9%	360,299
• Ratio of women of childbearing age to FP & OB/GYN providers		452:1
• Ratio of women of childbearing age to the total number of OB/GYN providers		2849:1

Other related information

• Population living at or below 100 % of the federally set poverty level equals	12%	368,965
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Provider Information

For the purposes of this count, primary care means all family practice, general internal medicine, and general pediatric, non-family practice-doing family practice and OB/GYN providers. The data does not count providers categorized as sub-specialists, federal providers, medical administration, research, state institution, teaching positions or urgent care.

Rural – 79 Counties

• OB/GYN Providers:		
○ Number working full-time		48
○ Number working part-time		0
○ Number of full-time equivalent positions	FTE	48
○ Average age is	Years	52
• Family Practice Providers:		
○ Number working full-time		531
○ Number working part-time		25
○ Number of full-time equivalent positions	FTE	543.5

○ Average age is	Years	50
● Primary Care Providers:		
○ Number working full-time		697
○ Number working part-time		31
○ Number of full-time equivalent positions	FTE	712.5
○ Average age is	Years	51

Urban – 20 MeSA

● OB/GYN Providers:		
○ Number working full-time		154
○ Number working part-time		2
○ Number of full-time equivalent positions	FTE	155
○ Average age is	Years	47
● Family Practice Providers:		
○ Number working full-time		523
○ Number working part-time		22
○ Number of full-time equivalent positions	FTE	534
○ Average age is	Years	49
● Primary Care Providers:		
○ Number working full-time		996
○ Number working part-time		33
○ Number of full-time equivalent positions	FTE	1012.5
○ Average age is	Years	49

Total Rural & Urban

● OB/GYN Providers:		
○ Number working full-time		202
○ Number working part-time		2
○ Number of full-time equivalent positions	FTE	203
○ Average age is	Years	50
● Family Practice Providers:		
○ Number working full-time		1,054
○ Number working part-time		47
○ Number of full-time equivalent positions	FTE	1,077.5
○ Average age is	Years	49
● Primary Care Providers:		
○ Number working full-time		1,693
○ Number working part-time		64
○ Number of full-time equivalent positions	FTE	1,725.0
○ Average age is	Years	50

Other Provider Information

● Number of certified nurse midwives (IBON)	99
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- Number of estimated OB/GYN nurse practitioners (IBON)

144

Note: Licenses show ARNPs have OB/GYN training, but do not specify if they are practicing.

		In State	Out of State
• Number of 2011 medical graduates entering residency programs	○ University of Iowa Carver College of Medicine	Family Practice	17
		OB/GYN	9
		Total:	26
○ Des Moines University College of Osteopathic Medicine		Family Practice	30
		OB/GYN	14
		Total:	44

Map

The map included at the end of this document indicates the 20 MeSA population groups and the number of OB/GYN FTE positions in each county. It should be noted that the University of Iowa Hospital and Clinics is located in Johnson County and the OB/GYN providers serving in teaching and research roles have been excluded. The FTE number will appear low, however, if it were possible to isolate and report the time spent seeing patients, the FTE count would increase in Johnson County.

Total Births by Attendant

2011 Iowa births are by occurrence regardless of residence (includes residents of other states)

Total Births by all Attendants	38,040	100.00%
Physician (MD)	25,935	68.18%
Physician (DO)	9,126	23.99%
Certified Nurse Midwife	2,608	6.86%
Other Midwife	171	0.45%
Other	200	0.53%
Not Classifiable	0	0.00%

Note: Data to indicate which specialty degrees were held by the involved providers are not available. Additionally, data is not available at this time to determine if the health care professionals provided prenatal and obstetrical care. The age of the providers delivering births is also unavailable because it is unknown which physicians actually provided each specific delivery.

Total Births by Birth Settings Iowa, 2011

Total	38,040
Hospital setting	37,600
In-home setting	440
Birthing Center	0
Clinic/Doc Office	0
Other	0
<hr/>	
	%
Rural hospitals	27.1 10,312
Urban hospitals	71.7 27,274

Hospital and Health Facility Information Iowa, 2011

Number of all Iowa hospitals, December 31, 2011

118

Note: Veterans Administration Hospitals excluding

- Hospitals in rural (non-metropolitan statistical area) areas
 - Number of Critical Access Hospitals, CAHs
 - Number of rural hospitals
 - Number of rural referral hospitals
 - Number that reported at least one delivery in 2011
- Hospitals in urban areas
 - Number that reported at least one delivery in 2011

96
82
8
6
60
22
20

Source: Iowa Hospital Association - 2011 Report

Obstetrical Health Care Provider Trends, Iowa -- 2007-2011

	2007	2008	2009	2010	2011
OB/GYN FTEs	181	182.5	200.5	209.5	203
Family Practice FTEs	1081	1,112.5	1092.0	1620.0	1077.5
Certified Nurse Midwives FTEs	80	80	87	80	99
Ratio of WCBA to PC providers	339:1	330:1	327:1	315:1	335:1

Closing Remarks

There continues to be insufficient data to respond completely to the information requested by the Iowa Legislature. After continued consulting with existing agencies providing provider data, it was determined that an annual health care professional survey is needed to determine such factors as:

- Scope of practice of health care providers,
- Area covered geographically by each practice,
- Number of hospital facilities used for deliveries, and
- Information on prenatal and obstetrical health-care access that is more detailed.

The issue of access to prenatal and obstetrical health care has become difficult to deal with beyond the need to report on the impact of tort reform on the availability of these services. This is due, in part, to lack of data and the growing use of physician assistants and nurse practitioners for provision of basic obstetrical care. A survey would provide both the basic information needed to track the impact of tort reform as well as information on such additional issues as:

- Coverage under Medicaid for non-insured patients,
- Issues related to the financial viability of obstetrical practice in rural areas,
- Issues of concern to providers; such as being on-call,
- Analysis of liability insurance coverage costs, and
- Information on birthing facilities in rural hospitals.

Currently, data must be compiled from many data sets, making it difficult to control consistency across variables. Existing agencies that could provide this data do not currently have either the capacity or the intention to develop services in this area.

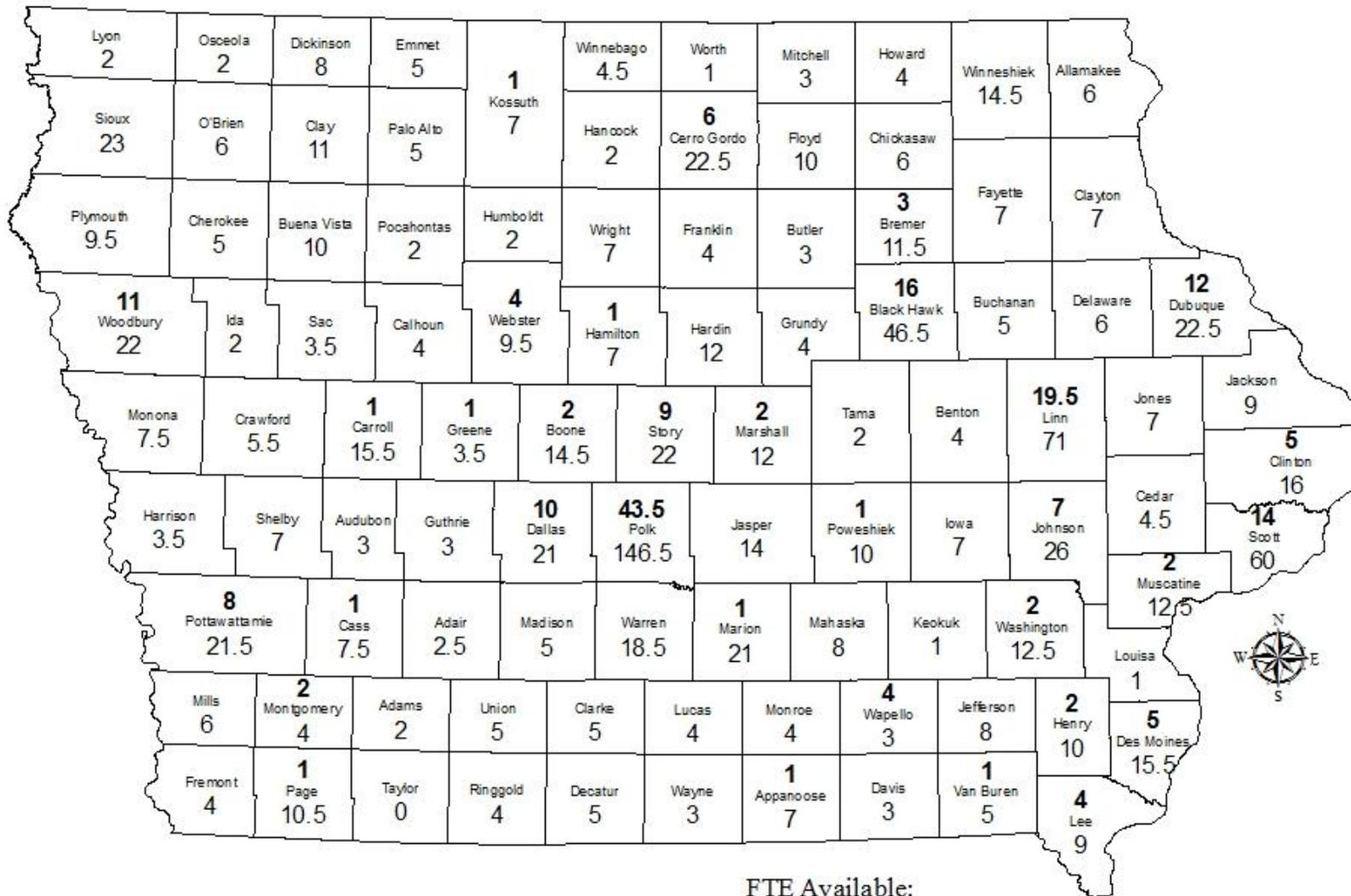
The Iowa Department of Public Health met with agencies to determine how their problems could be remedied. It was determined in the 2000 annual report to the General Assembly on access to obstetrical care that if more accurate data were wanted, additional funds would need to be secured annually to pay for a survey by the University of Iowa, Carver College of Medicine, Office of State Wide Clinical Education Programs. In 2000 it was estimated that the lead-time needed to implement a survey in 2001 would mean the earliest available report would be for the calendar year 2002. Since this office has not received any response or direction from the previous year's reports, citing this information, new actions have not been taken and OSCEP continues to be informed of this report.

The Bureau of Oral and Health Delivery Systems, Iowa Department of Public Health, requests once again that the members of the Legislature review this mandated report and determine one of the following actions:

- Continue the report as submitted,
- Allocate funding to generate the additional data needed to complete the report as mandated, or
- Remove the report from the current legislation if it is deemed unnecessary.

The Iowa Department of Public Health is not authorized to discontinue this report or undertake a new survey without further direction or funding. Additional information may be covered or questions asked by contacting: Bob Russell, Bureau Chief, Bureau of Oral and Health Delivery Systems, Iowa Department of Public Health, 321 East 12th Street, Lucas State Office Building, 4th Floor SW, Des Moines, Iowa 50319 or call 515-242-6383.

OB/GYN Report Year 2012



County Boundaries
 County Boundaries

FTE Available:
Upper Number = OB/Gyn Providers
Lower Number = Family Practice Providers